

Art

Art Clinics with Dorothea Barrick 14 yrs-Adult / 1 day *Emmitsburg Community Center*

16549 Sat, 11/10 9:30 am-Noon **\$25** Georgia O'Keefe Flowers with Watercolor

16550 Sat, 12/8 9:30 am-Noon **\$25** Snow Scene with Acrylic and Palette knife

Basketball

 BASKETBALL PREP (L-1)
 5-6 yrs / 5 wks

 Thurmont Rec Center
 5-6 yrs / 5 wks

 16074 Thu, 11/1 3:30-4:15 pm
 \$29

 16075 Thu, 11/1 4:30-5:15 pm
 \$29

 BASKETBALL PREP (L-2)
 6-8 yrs / 5 wks

 Thurmont Rec Center
 6-8 yrs / 5 wks

16089 Thu, 11/1 5:30-6:15 pm

Fitness

ZUMBA 14 yrs-Adult / 6 wks Thurmont Rec Center 15942 Mon, 10/29 6:30-7:30 pm \$30 \$30 **16014** Tue, 10/30 7:00-8:00 pm 16016 Wed, 10/31 7:00-8:00 pm \$30 15935 Thu, 11/1 6:00-7:00 pm \$30 16017 Sat, 11/3 10:00-11:00 am \$30

\$29

Multi-Sports

 SPORTS BONANZA
 3-5 yrs / 5 wks

 Thurmont Rec Center
 \$29

 16167 Sat, 11/10 9:00-9:45 am
 \$29

 16168 Sat, 11/10 10:00-10:45 am
 \$29

 16169 Sat, 11/10 11:00-11:45 am
 \$29

Soccer

 SOCCER PREP (L-1)
 5-6 yrs / 5 wks

 Thurmont Rec Center
 \$29

 16192 Tue, 10/30 3:30-4:15 pm
 \$29

 16193 Tue, 10/30 4:30-5:15 pm
 \$29

 SOCCER PREP (L-2)
 6-8 yrs / 5 wks

 Thurmont Rec Center
 \$29

 16201 Tue, 10/30 5:30-6:15 pm
 \$29





Frederick County Division of Parks and Recreation REGISTRATION FORM

Mail: FCDPR, 118 North Market St., Frederick, MD 21701 (Please make check payable to Frederick County Treasurer)

By Phone: 301-600-2936 **Fax:** 301-600-2595

Parent/Guardian Name (if participant is u	nder 18 years of age)					
Address		_City		State	Zip	
Home Phone	Work/Cell Phone		E-mail			
Emergency Contact Name			Emergency Pho	ne		
Medical Conditions: Participant name:		Medical Cond	dition:			

Participant's Name	Gender	D.O.B.	Program Name	Program Code	Fee
		1 1			\$
		1 1			\$
Attach additional registrations on a separate piece of paper if necessary					\$
Credit Card (Visa, MasterCard, Discover)	Card #		Exp. Date	We will notify you is a problem or a c program	hange in the

Waiver of Liability: By my signature below, I acknowledge that there are inherent risks and dangers associated with recreation program/s and therefore, I hold the Board of County Commissioners of Frederick County (BoCC) harmless from all claims for injuries, damage, or loss which may result from me or my child's participation in the program/s listed above. Further, in compliance with Maryland HB 858 and SB 771, I hereby acknowledge that I understand the risks of concussions in sports and am aware of the concussion information which is found at www.recreater.com

<u>Discipline Policy:</u> I understand that the Division has a discipline policy for conduct in recreation programs and facilities. In the event that I/my child is asked to leave a program/facility, I understand that the registration fee will not be refunded to me.

Authorization for use of Photographic Likeness: I agree to allow Frederick County Parks and Recreation to take and utilize photos, slides, and video images of the above registered individual/s for the purpose of promotion and publicizing of the Division's programs and/or events. If I prefer to not allow the above registered individual/s to be photographed, I will call 301-600-1684 to register my request.

Refund policy: If you want to withdraw from a program, call 301-600-2936. All requests for refunds must be made 2-weeks prior to the start of the program. A \$4 processing fee will be charged for each participant per program refunded. All refund requests must be approved by the Recreation Superintendent. Refunds will be issued according to the original method of payment, unless payment was made by cash, then a check will be issued.